Assessing the Feasibility of Developing an Independent Living Resource Centre in Hamilton

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1.0 INTRODUCTION

During the summer of 2003, with funding through the Hamilton Community Foundation, the Hamilton Integrated Living Project (HILP) contracted the Social Planning and Research Council of Hamilton (SPRC) to assess the feasibility of developing an Independent Living Resource Centre (ILRC) in Hamilton.

As described in detail in the review of literature, an ILRC is a non-profit, community based resource centre, that supports persons with disabilities to achieve their personal goals of independent living. An ILRC is run by persons with disabilities for persons with disabilities, regardless of disability type.

While all ILRC's are different in that they respond to the needs of their community, there are four core services common to each. These core services include providing information on local programs and services for persons with disabilities, peer support, advocacy, and research and program development. The study identifies the local need and potential benefits of these core services, as well as considering other potential roles for a local ILRC.

The study was conducted in four phases, each phase building on findings from the previous. Each phase of the study represented a different method of data collection, including a survey, key informant interviews, focus groups, and small group discussions held as part of a community forum. Stakeholders consulted through the course of the study included persons with disabilities, caregivers and local service providers.

Following a literature review that describes the values of ILRC's and the independent living movement, the report provides overview of research methods and findings from each phase of the study. Based on a syntheses of findings from each phase of the study, the report presents a set of conclusions which highlight both the need for a local ILRC, as well as the potential benefits to both individuals and the broader community.

2.0 LITERATURE REVIEW

In the 1960s and 70s the human rights movement facilitated the birth of the disability movement, which aimed to eliminate social imposed restrictions on people with disabilities. During the early stages of the movement however, segregation and dependency were still being supported through the common adoption of a rehabilitation model (Chappell, 2001).

In response, the Independent Living (IL) movement has began to spread throughout North America (and around the globe). By connecting disability issues to the basic tenets of the human rights movement, it has been changing the way people view and respond to disability (CAILCa). The IL philosophy focuses on environmental issues such as physical and attitudinal barriers that prevent full integration and participation in society (Chappell, 2001). The emphasis is on peer support, self-directed services, and barrier removal (CAILCa). Furthermore, it asserts that all people have an equal right to participate fully in Canadian society.

One of the most direct results of the IL movement has been the creation of Independent Living Resource Centres (ILRC). ILRCs operate to promote and embody the philosophy of the Independent Living movement.

2.1 What is an Independent Living Resource Centre?

An Independent Living Resource Centre or ILRC is a non-profit, community based resource centre that assists people with disabilities to achieve, as much as possible, their personal goals of independent living (CAILCc). The promotion of independent living is achieved through a commitment to 4 guiding principles, including:

(1) Consumer Control: the programs and resources at an ILRC are governed, controlled, and provided predominantly by people with disabilities.
(2) Cross-disability: programs and resources are open and responsible to persons with all types and combinations of disabilities.
(3) Community Based: ILRCs are mandated to respond to the unmet needs of consumers in the local community, with a focus on the unmet needs of the individual.
(4) Promotion of Full Integration and Participation: Each centre works toward fully integrating every person with a disability into their chosen communities, as well as ensuring that each individual is able to participate as fully as possible in their communities. (CAILCb)

These basic principles are adhered to throughout the implementation and administering of an ILRC's four core services, which are as follows (CAILCb):

(1) Information and referral: an ILRC is a local resource centre that offers information on programs, products, and services, while educating about disability issues.
(2) Peer support: people with disabilities are available and potentially best able to offer advice, support and encouragement to individuals pursuing their goals to independent living.
(3) Individual advocacy: ILRCs assist people with disabilities to represent themselves in working to remove barriers that prevent them from achieving their independent living goals.
(4) Research and Program Development: ILRCs offer many unique programs such as employment, literacy, and self-managed attendant care services. These programs are developed in response to existing unmet needs, and programs are developed with attention to not duplicating existing services in the community.

Since 1986, the Canadian Association of Independent Living Centres (CAILC) has acted as the national voice of ILRCs in Canada, as well as helping to coordinate and strengthen their activities. CAILC is located in Ottawa, and has a Board of representatives, each representing every ILRC in Canada.

Although there is a national centre, it is important to remember that each centre remains community-based and locally governed. CAILC assists each ILRC by supporting ILRC staff and volunteers, developing training and resources that can be shared, linking each centre into a powerful network, promoting the Independent Living philosophy and work of ILRCs at the national level (CAILCa).

2.2 ILRC's in Canada

Independent Living Resource Centres have been growing in number within Canada as the philosophy of Independent Living gains increased value and recognition. There are currently 24 ILRCs in Canada and 2 additional centres that have been granted development status. The creation and development of an ILRC is based on community need and those needs vary from city to city. Local need is reflected through the programs and services the ILRC provides.

All of the ILRCs provide the four core services previously detailed, including information and referral, peer support, advocacy and, research and program development. For each ILRC however, these services are designed to meet the

needs of their respective community. In addition, each ILRC provides specialized programs and services designed to address priority issues identified by its members.

The Independent Living Resource Centre of Calgary for example, is home to the Crime, Violence and Abuse Prevention Project. The focus of this project is to create awareness concerning the violence persons with disabilities may experience. The Centre provides information to consumers about how to protect themselves from abuse, as well as information on community support and emergency services. The Calgary ILRC also provides a career development program called "Navigating the Waters".

The Independent Living Centre in Toronto is one of the largest centres in Canada. The primary focus of this ILRC is to train and support individuals to advocate on their own behalf. Their program, 'Individual Advocacy Skills Training', helps clients become their own effective spokespersons in overcoming barriers to independent living.

The Ottawa ILRC administers a program which provides funding supports directly to persons with disabilities. This program allows adult consumers to be completely responsible for budgeting their funds, including hiring their own service care providers.

Helen Katz discusses the current employment opportunities that ILRC's have been providing for clients, in the article "New Challenges and New Partnerships: Employment Initiatives in Independent Living.' The literature has been showing a general trend emerging among ILRCs. After training clients with employable skills, the centre hires the consumer to work within the ILRC. She explains that the focus on employment has been very important for many ILRCs in order to assist consumers in meeting their economic needs. A major component of these programs is providing clients with employable skills, such as computer training. Katz's article highlights employment initiatives undertaken in Kingston, Thunder Bay and Niagara.

The Niagara Centre for Independent Living, for example, has been developing a community model that would create accessible employment as well as develop support services to sustain that employment. This model would work between consumers, employers and service providers.

The majority of the literature discussing the impact of ILRCs indicates that their impacts have been generally positive on individuals and communities. In terms of impacts on individuals, ILRC's have been shown to break down social isolation and provide valuable social supports (Bendall, 1997; Katz, 1993).

In a collaborative study between a number of Canadian universities and CAILC, findings showed a high profile of ILRC's in their communities (CAILC d). Citizens of communities with ILRC's indicated that they were familiar with ILRCs, their philosophy, and their programs (although to varying degrees). Furthermore, community members perceived that the impact of the ILRC in their community was positive.

While ILRC's have generally shown a number of positive impacts on individuals and communities, there is still some difference in opinion among ILRC's in Canada. As one of the four core programs of an ILRC, research and program development has been identified as a sensitive and complicated issue within the ILRC network.

Much of the research being conducted within disabled communities through Independent Living Centres and the Independent Living Movement is designed around the medical model and does not address the larger societal barriers affecting the individual. The focus is instead put upon the individual with the disability (CAILC e).

CAILC e) advocates for the participatory action research model which mandates that the research being conducted within the disabled community must be done by individuals with disabilities. The involvement of individuals with disabilities better ensures that the research is designed with input from experienced consumers, and carried out in a sensitive and non-oppressive manner.

3.0 RESEARCH METHODS

The study was designed to collect a range of quantitative and qualitative information to determine the need and interest in developing an ILRC in Hamilton. Four different methods of data collection were employed through the course of the study, including a survey, key informant interviews, focus groups and small group discussions held as part of a community forum. Each of these data collection methods represents a distinct phase of the study.

Data collection tools were developed to gather information from three specific stakeholder groups. Stakeholders, in this case, include persons with disabilities, family of persons with disabilities, and local service providers. Using a series of data collection methods allowed researchers to build on findings from the previous method, starting with a survey of key informants. Following is an overview of each data collection method, in the order that they were undertaken.

3.1 Phase 1: Survey of Key Stakeholders

During phase 1 of the study, a survey of key stakeholders was employed (see APPENDIX A for a copy of the survey). A survey method allowed for broad distribution and the collection of information and perspectives of a large group of key stakeholders.

In total, 68 surveys were completed by key stakeholders, the majority of whom were persons with disabilities. Surveys were distributed by staff and students working with the Hamilton Independent Living Project (HILP). Completed surveys were either delivered to the SPRC or mailed directly by respondents. Survey data was analyzed using SPSS software.

The survey was designed to collect basic demographic information from survey respondents, gauge the level of interest in a local ILRC and ILRC membership, and assess the local need and potential benefits of the four core services that ILRC's provide. These four core services include information and referral, peer support, advocacy, and research and program development.

3.2 Phase 2: Key Informant Interviews

Phase 2 of the study involved conducting key informant interviews with stakeholder groups. A "key informant" is a member of a stakeholder group who has knowledge and experience relevant to the study. For example, if we are interested in the local service system for persons with disabilities, a person new to Hamilton would not make a good key informant. By conducting a number of key informant interviews with members of different stakeholder groups, a researcher is able to identify common perspectives or themes from the various responses. Interviews also allow the researcher to add depth to some of the findings from the survey conducted during phase 1.

In total 8 key informant interviews were conducted, 4 with persons with disabilities, 2 with family members of persons with disabilities and 2 with local service providers. The majority of interviews were conducted by telephone, and lasted from twenty to forty-five minutes.

The format for the key informant interviews was based on findings from phase 1 (see APPENDIX B for a copy of the key informant interview format). Findings from the survey of key stakeholders supported the local need for each of the core services provided by ILRC's, and their contribution to independent living. The interview had four sections, each dedicated to a specific service type, including access to information, peer support, advocacy, and research and development. Each section included two questions designed to elicit perspectives on how a local ILRC could provide or support the delivery of each service type.

3.3 Phase 3: Focus Groups

Focus groups were conducted during phase 3 of the study. Five focus groups were conducted in total, one with local service providers, three with persons with disabilities and one with family of persons with disabilities. Each focus group lasted approximately forty-five minutes. Focus groups were organized by HILP staff and students, and the majority were conducted by a researcher from the SPRC.

In terms of the focus group format, again, the design was based on findings from the previous phases of research. While phase 1 identified the need an importance of the four core services provided through ILRC's, phase 2 provided insight into how this might be approached locally. Some common themes emerged through

responses from key stakeholders through both phases. Specifically, the need for a local ILRC to build community trust, and the need for training for ILRC staff and volunteers.

The focus group format had three sections, collecting information and perspectives on the priority needs of the disabled community in Hamilton, community trust building, and training for ILRC volunteers.

3.4 Phase 4: Community Forum - Small Group Discussions

The final phase of research involved small group discussions held as part of a community forum. The forum was held on Friday, December 5, at the Hamilton Public Library (downtown). The forum was organized with two objectives. First, to share our findings from our research to date. Second, to give participants the opportunity to share their perspectives on some of the key issues.

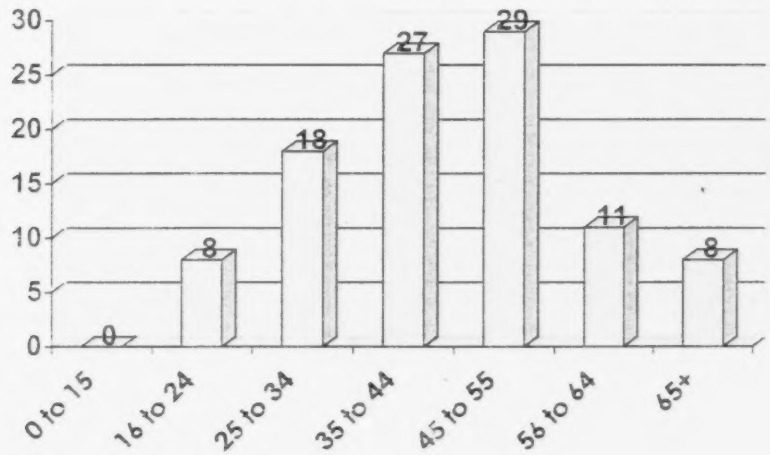
In total, seventeen individuals participated in the open forum, and one of two discussion groups. The format for small group discussions was based on findings to date, and designed to add depth to some of the findings not clearly understood. Small group discussions were broken into three sections, to collect information and perspectives on building ILRC membership, providing individual supports in accessing local programs and services, and the potential relationship between a local ILRC and the local service sector.

4.0 SURVEY FINDINGS

During phase 1 of the study, a survey of key stakeholders was conducted. A survey method allowed for broad distribution and the collection of information and perspectives of a large group of key stakeholders.

In total, 68 surveys were completed by key stakeholders. Of this total, thirty-four (34) or fifty percent (50%) identified themselves as "a person with a disability". In terms of gender, sixty-six percent (66%) of survey respondents were female, while thirty-four percent (34%) were male. CHART 1 shows the age distribution of survey respondents. The majority of respondents were between the ages of 35 to 55 years (56%).

CHART 1: The Age Distribution of Survey Respondents



The following sections of this chapter provide an overview of findings from the survey of key stakeholders. Consistent with the survey design, findings are presented under five categories, including access to information, peer support, advocacy, research and program development and ILRC membership.

4.1 Access to Information

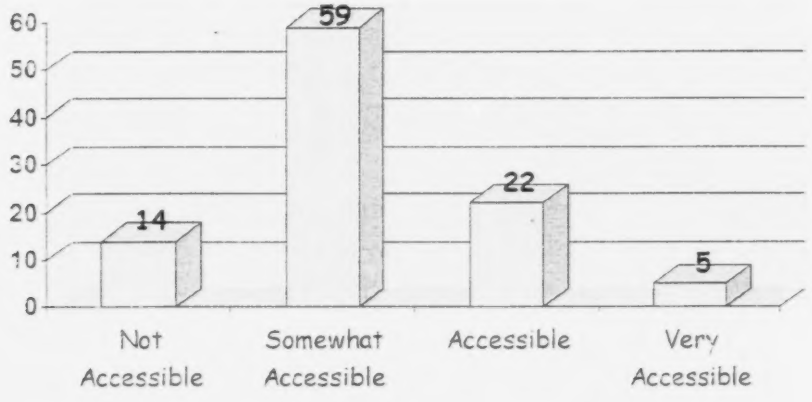
Providing central access to information on local programs and service opportunities is one of the core functions of an ILRC. This section of the survey was designed to assess the level of accessibility of information in Hamilton.

Survey respondents were provided with a four-point scale, and asked the following question:

"On a scale form 1 to 4 (1 being "not accessible" and 4 being "very accessible", how accessible is information on local programs, services and opportunities for persons with disabilities?"

As shown in CHART 2, the majority of respondents (74%) felt that information is either "not accessible" or "somewhat accessible" locally.

CHART 2: The Accessibility of Information in Hamilton



To identify what types of information is most difficult to access, survey responcents were given a list of different program and service areas and asked to check all that applied. TABLE 1 shows the distribution of responses.

Information on local housing services was most often identified as difficult to access in Hamilton, by sixty-three percent (63%) of those surveyed.

TABLE 1: Level of Difficulty in Accessing Information by Service Type

Service Type	% of Respondents
Employment programs	46%
Housing programs	63%
Health care services	35%
Home care services	49%
Financial supports (eg. ODSP, OW, WSIB)	43%
Transportation	38%
Life-skills training	37%
Recreational opportunities	34%
Social events	31%

Employment (46%) and home care services (49%), were also rated high in terms of accessibility of information, as was financial supports such as Ontario Disability Support Program (ODSP) or Ontario Works.

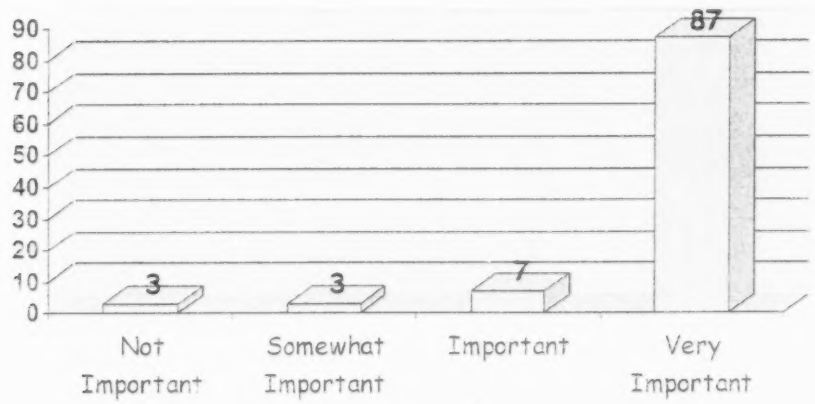
In terms of where individuals access information on local programs and services, thirty-seven percent (37%) of those surveyed identified "local community service agencies". The second most common source of information however, was "friends and family" (24%), or what we would consider "word of mouth". This suggests that local program and service opportunities for persons with disabilities are not being marketed effectively in Hamilton.

The final question in this section of the survey was designed to assess how important access to information is, in terms of achieving goals of independent living. Respondents were provided with a four-point scale, and asked the following question:

"On a scale from 1 to 4 (1 being "not important" and 4 being "very important"), how important is access to information for persons with disabilities, in achieving their goals of independent living?"

As shown in CHART 3, ninety-four percent (94%) of respondents felt that access to information is "important" or "very important" to achieving ones goals of independent living.

CHART 3: The Importance of Access to Information



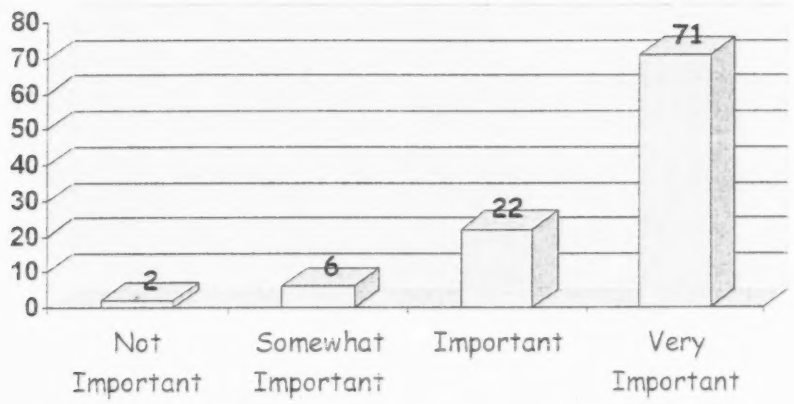
4.2 Peer Support

Peer support programs involve persons with disabilities supporting others with disabilities to deal with their issues, either in groups or on an individual basis. Peer support is also one of the four core services provided through local ILRC's. Survey respondents were provided with a four-point scale and asked the following question:

"On a scale from 1 to 4 (1 being "not important and 4 being "very important") how important is peer support for persons with disabilities in achieving their goals for independent living?"

As shown in CHART 4, ninety-three percent (93%) of respondents identified peer support as either "important" or "very important" to achieving goals of independent living.

CHART 4: The Importance of Peer Support



In terms of priority areas where peer support is most needed locally, those surveyed were asked "what do you see as the most important issues for persons with disabilities that could be supported through a peer support program?"

Respondents were asked to identify the top three issues. Most often identified was the need for peer support in addressing social or emotional issues. Peer support in accessing employment and housing was also identified.

In efforts to gauge the level of interest in providing peer support, survey respondents were asked "with the proper training, would you consider providing peer support?" Among respondents that identified themselves as a person with a disability, fifty percent (50%) agreed that they would consider providing peer support.

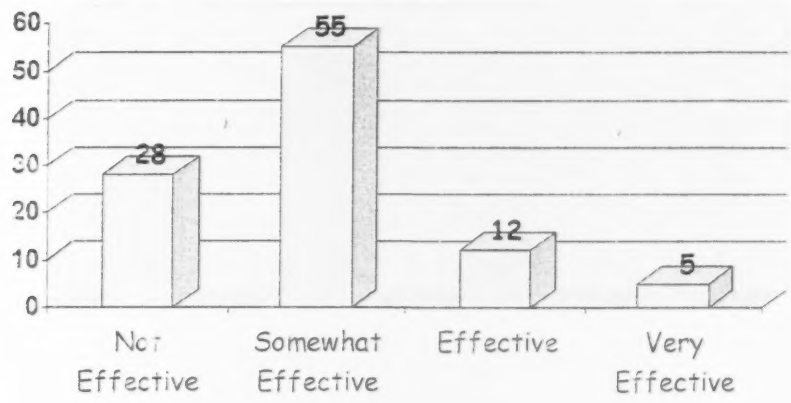
4.3 Advocacy

Advocacy may involve organizing around a specific issue facing persons with disabilities, and lobbying local, provincial or federal governments for change. To understand the history of local organizing and lobbying within the disabled community, the following question was posed:

'On a scale from 1 to 4 (1 being "not effective" and 4 being "very effective"), how effective do you feel the disabled community in Hamilton has been in organizing and lobbying for change?"

As shown in CHART 5, eighty-three percent (83%) of respondents felt that the disabled community in Hamilton has been "not effective" or only "somewhat effective"

CHART 5: The Effectiveness of Organizing and Lobbying



With respect to the benefits of organizing and lobbying, the survey asked "do you believe that organizing and lobbying can achieve change in policies that effect persons with disabilities?". Ninety-two percent (92%) of respondents believed that organizing and lobbying can achieve change.

To better understand the priority issues or policies that require change, those surveyed were asked "what do you see as the most important issues facing persons with disabilities, that requires changes to government policies?". Respondents most often identified housing and poverty issues, access to home care and physical accessibility.

4.4 Research and Program Development

One role of an ILRC is to identify needs of persons with disabilities in the community, and work with local service providers to develop programs and services to help meet those needs.

The survey asked respondents to identify the types of programs and services for persons with disabilities that are most lacking in Hamilton. As shown in TABLE 2, the types of services most often identified were "home care" (46%) and "employment services" (43%).

TABLE 2: Local Program and Service Needs

Service Type	% of Respondents
Employment Services	43%
Life-skill services	35%
Housing services	37%
Home care services	46%
Recreational services	29%
Social programs	25%
Social programs	27%
Transportation services	35%
Financial supports	35%

To gauge the interest among respondents in participating in local research and development, the survey asked "would you be willing to work with others in the planning and development of programs to meet these needs". In total, sixty-six percent (66%) of respondents said that they would be willing to participate in local research and development. Among respondents who identified themselves as a person with a disability, this figure is sixty-eight percent (68%).

4.5 ILRC Membership

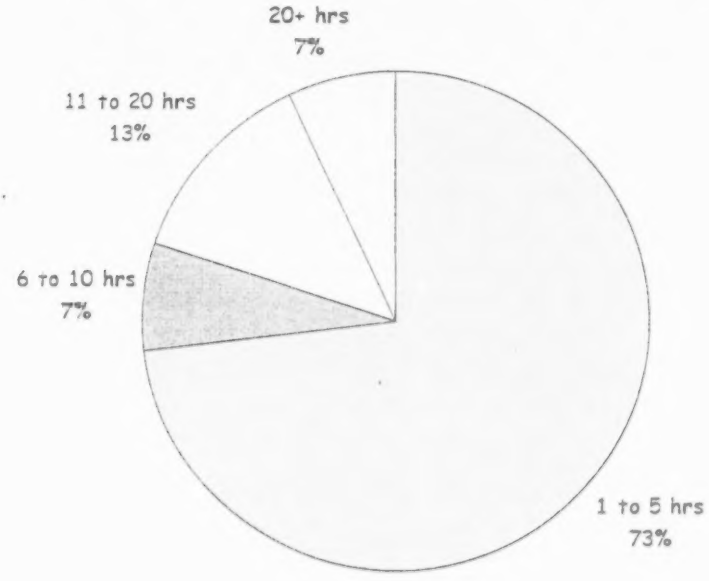
An ILRC provides opportunities for individuals with disabilities to find support and to support others in achieving their goals of independent living. Membership in an ILRC is as much about active participation as it is about receiving supports, and

membership would be open to all individuals who wish to support the disabled community in Hamilton.

To gauge the level of interest in ILRC membership, the survey asked "from what you have learned about an ILRC, would you be interested in becoming a member of this type of organization?" In total, sixty-nine percent (69%) of respondents expressed interest in ILRC membership. Among those identified as persons with disabilities, this number climbs to seventy-three percent (73%).

In terms of volunteerism, respondents were asked how many hours per month they would be willing to contribute to the operation of a local ILRC. CHART 6 show the distribution of responses (T=45). The majority of respondents were willing to work up to five hours per month on a volunteer basis (73%).

CHART 6: Volunteer Hours Per Month



As most ILRC's depend on membership fees as part of their annual operating budget, survey respondents were asked if they would be willing to pay an annual membership fee and, if so, how much? In total, sixty-five percent (65%) of respondents agreed that they would be willing to pay a membership fee.

In terms of what individuals would be willing to pay, forty-five percent (45%) felt that twenty-five dollars was a reasonable fee, while thirty-eight percent (38%) felt that an amount less that twenty-five dollars annually would be reasonable.

5.0 FINDINGS FROM KEY INFORMANT INTERVIEWS

Phase 2 of this study involved conducting in-depth interviews with "key informants". Key informants are identified as having a particular expertise or understanding of an issue, based on personal experience. In total, eight individuals were interviewed, including four persons with disabilities, two family members of persons with disabilities and two local service providers connected to the disabled community.

The format for key informant interviews was designed to build on findings from phase 1 of the study, a survey of key stakeholders. Survey findings suggest the need for the provision or coordination of each of the four core ILRC service types locally, including increasing access to information on local programs and services, peer support, advocacy, and research and program development.

For each of the four core service types a statement describing the issue was presented, incorporating survey findings. Two questions were posed related to each service type. The following sections highlight the key themes that emerged through discussions with key informants.

5.1 Access to Information

The issue of limited access to information on local programs and services figured prominently in findings from phase 1 of the study. In order to provide context to the issues the following statement was read to each key informant interviewed:

> "While the majority of those surveyed felt that access to information on local programs, services and opportunities for persons with disabilities is important to achieving their goals of independent living, it was indicated that such information is currently not very accessible. In fact, more than half of those surveyed identified informal sources such as friends and family, family doctor and social workers as their primary sources of information."

Understanding the need for a more coordinated system of disseminating information on local programs and services, researchers were interested in how such a service might be provided locally. To better understand what supports would be required to help individuals identify and access appropriate programs and services, the following question was posed:

> "In your opinion, if comprehensive and up-to-date information on local programs, service and opportunities for persons with disabilities was maintained through an ILRC, would members/clients require support in identifying the most appropriate programs and services for them?"

An analysis of findings from responses from key informants revealed two key themes or common responses. First, the majority of those interviewed felt that ILRC members or clients would indeed require support in identifying the most appropriate programs and services for them.

Secondly, it was identified that currently within the disabled community, there is a lot of frustration around accessing local programs and services. It was suggested that individuals need help in understanding all of the "red tape" associated with accessing programs and services.

To understand specifically what types of supports that individuals might require, key informants were asked "What types of supports do you feel might be needed?"

Again, key themes emerging from responses suggest the need to support individuals in navigating the service system. In terms of specific supports, key informants identified assisting clients with applications for programs and services, support with reading and technical language, and support with problem-solving.

Findings from responses to this section of the interview suggest the need for three different levels of support in accessing existing programs and services for persons with disabilities. First, compiling and maintaining comprehensive and up-to-date information on local program and service opportunities; second, supporting individuals in identifying the most appropriate programs and services for them, and; third, supporting individuals in actually accessing specific programs and services.

5.2 Peer Support

The concept and application of peer support models was also supported through findings from phase one of the study. In order to provide context to the issues the following statement was read to each key informant interviewed:

> "Peer support programs involve persons with disabilities supporting others with disabilities to deal with their issues, either in groups or on an individual basis. The majority of those surveyed felt that peer support is very important for persons with disabilities in achieving their goals for independent living."

To better understand how peer support could be offered or supported through a local ILRC, the following question was posed: "From your perspective, how could an ILRC coordinate or offer peer support to its members?"

Four key themes emerged from responses to this question. First, respondents felt that training was important to the development of a peer support program. As one key informant suggested, peer support can actually do more harm than good if those providing support are not adequately trained. Specific models of training and providing peer support were suggested, including the model used by the Canadian Paraplegic Association.

Secondly, it was suggested that peer support should be provided by individuals with a range of disability types. This would allow clients an opportunity to connect with someone facing some of the same circumstances. It was also suggested that efforts be made to connect clients with persons without disabilities, in order to expand existing social networks.

A fourth theme related to coordinating or offering peer support through a local ILRC was to update its members as to upcoming events or opportunities for persons with disabilities. While not one-on-one peer support, this type of approach would provide members with a means to both communicate and to stay connected with the broader community.

In efforts to understand the current availability of peer support programs locally, key informants were asked the following question:

> "In your experience, are there other peer support networks or services currently operating in Hamilton? If "Yes", are there any gaps or areas where peer support is not available?"

In response to this question, a number of local peer support networks were identified, both formal and informal. A key theme emerging from responses to this question was that while a number of peer support opportunities exist locally, there is a lack of information on existing networks and programs. It was suggested by respondents that one clear function of a local ILRC with respect to peer support would be to coordinate and disseminate information on existing networks and programs.

5.3 Advocacy

Advocacy is also identified as a core service or function of an ILRC, which was supported through findings from phase 1 of this study. In order to provide context to the issues the following statement was read to each key informant interviewed:

> "Advocacy is defined as "organizing around a specific issue facing persons with disabilities, and lobbying local, provincial or federal governments for change". While more than 95% of those surveyed felt that lobbying can achieve change, the majority felt that the disabled community in Hamilton has not been particularly effective in this role."

In order to better understand how a local ILRC could support the disabled community in identifying and addressing local issues, the following question was posed: "From your perspective, how could an ILRC help the disabled community to identify and prioritize issues to address?"

From responses to this question, three key themes emerged. Respondents suggested that a local ILRC could act as a "hub", where different disability groups could come together. Through this hub, disability groups could work together in developing a coordinated message and strategies for change. As one respondent suggested, "a single voice" for the disabled community.

A second theme that emerged from responses was the need to establish working relationships with local decision makers. As a hub connecting various local disability groups, an ILRC could act as an important resource to local decision makers, in terms of identifying strategies to address local disability issues.

While related more to individual advocacy, respondents also identified the need to teach persons with disabilities to advocate for themselves. Specifically, self-advocacy with respect to accessing local programs and services.

A second question regarding advocacy was posed to identify approaches to organizing within the disabled community. The question was posed as follows: "How could an ILRC help to effectively organize the disabled community in lobbying efforts?"

The main theme emerging from responses to this question was that an ILRC would need to gain the trust of the disabled community. Members and potential members

of a local ILRC must feel that they have control over the operation and agenda of the organization.

As a means to connecting with members of the disabled community, respondents identified outreach - engaging people where they live or through existing programs. As a second organizational tool, key informants suggested the need for more education within the disabled community, with a focus on the rights of the individual.

The final theme with respect to organizing the disabled community was the need to coordinate efforts with clear goals. Respondents suggested that a clear course of action with clear goals and identifiable outcomes will add credibility and encourage support.

5.4 Research and Program Development

Conducting research and program development is also identified as one of the four core functions of an ILRC. In order to provide context to the issues the following statement was read to each key informant interviewed:

> "Part of the role of an ILRC is to identify local needs and work with local service providers to develop programs and services to address these needs. Specifically, those surveyed identified housing, home-care, financial supports, and transportation as program types most lacking in Hamilton."

To assess whether a local ILRC would be viewed by local decision makers as an authority on disability issues, the following question was posed:

> "In your opinion, would local service providers view an ILRC as being a local authority in terms of identifying issues and recommending strategies for change?"

Key informants interviewed reiterated the need for a "single point of contact" or hub, where consensus on local issues and strategies could be established across disability groups. Again, the notion of "one voice". Respondents also emphasized the credibility associated with a large and involved membership. As one key informant suggested, "the greater the involvement the stronger the voice..decision makers will have to listen".

To establish the potential role(s) of an ILRC in local program development, key informants were asked the following question: "How could an ILRC help to facilitate or coordinate local program development?"

Respondents identified the need for research to both identify community needs and to develop viable solutions. The primary role of an ILRC, as identified by key informants, could be to act as an intermediary. From this perspective, an ILRC could assist by facilitating the sharing of information and consensus building. These functions are important to the development of effective and inclusive programs and services.

6.0 FOCUS GROUP FINDINGS

Phase 3 of this study involved conducting focus groups with key stakeholders. Key stakeholders in this case included persons with disabilities, family of persons with disabilities and local service providers. In total, four focus groups were conducted.

The format for focus group discussions was designed to build on findings from phases 1 and 2 of the study. Survey findings suggest the need for the provision or coordination of each of the four core ILRC service types locally, including increasing access to information on local programs and services, peer support, advocacy, and research and program development.

Through the course of this investigation however, a series of questions emerged which required further clarification and insight from key stakeholders. The focus group format identifies three specific areas for consideration in developing a local ILRC. These include the local priority service needs, building community trust, and training ILRC volunteers.

For each of these three areas for consideration, a statement describing the issue was presented incorporating survey findings and findings from key informant interviews. Two questions were posed for each issue area. The following sections highlight the key themes that emerged through focus group discussions.

6.1 Priority Services

The first part of the focus group discussions was related to identifying the local priority with respect to ILRC core service types, as well as identifying what other types of services an ILRC could provide locally. To provide a context for the discussion, the following statement was read to each focus group:

> "Currently there are 24 Independent Living Resource Centres in Canada. Most ILRC's provide a common set of four program or service types, including information and referral, peer support, advocacy and, research and program development."

To identify the local priority service need (based on the four core ILRC services) the following question was posed:

"Based on your knowledge of what services and supports currently exist in Hamilton, which of these four program/service types would you consider most needed locally?"

There was agreement among participants that of the four core ILRC services, centralized access to information on local programs and services is most needed locally. It is also important that information is relevant to all disability groups.

A second theme that emerged from focus group discussions was the need for a program that provides peer support to individuals in accessing existing local programs and services.

The role of connecting various disability groups was also a prominent theme in this discussion. Again, the notion of "one-voice" was identified as a benefit of an organized disabled community.

Outside of the four core ILRC service types, there was interest in what other types of services or supports a local ILRC could provide to persons with disabilities. The following question was posed to each focus group to provide a context for discussion: "What other activities or roles could a local ILRC become involved in, that would support persons with disabilities in Hamilton?"

Focus group participants identified two roles that would support persons with disabilities in Hamilton. Expanding on the previous discussion, participants identified the need for individual supports in accessing local programs and services. Participants identified a high level of frustration among persons with disabilities around accessing services, due to such issues as complicated application processes and changing criteria for admission.

The second important ILRC role identified by focus group participants was the coordination of local disability groups. Again, the notions of "one voice" and "strength in numbers" were prominent in this discussion.

6.2 Building Community Trust

A second issue identified through an analysis of findings from phases 1 and 2 of this study, was that of building community trust. This part of the focus group discussion was designed to identify how a local ILRC could build trust among two key stakeholder populations, including persons with disabilities and local service providers.

To establish a context for discussion, the following statement was read to each focus group:

> "Findings from our survey and interviews suggest that an ILRC should be a central hub, where local disability groups, service providers and persons with disabilities can share ideas and information, and coordinate efforts that promote independent living. At the same time, the issue of "trust" was raised as a factor that might affect participation."

In terms of building trust among the local disabled population, the following question was posed: "In your opinion, how could an ILRC build trust among persons with disabilities in Hamilton, and encourage participation in ILRC activities?"

It was clear from focus group discussions that a history of bad experiences and let-downs have created a sense of distrust within Hamilton's disabled population. According to participants, many of these "let-downs" were related to programs being under-resourced or where program funding was not sustained.

Participants felt that, in order to build trust within the disabled community in Hamilton, an ILRC would need to show follow-through on actions and initiatives. An ILRC could begin to establish credibility through action and achievement.

In terms of organizational structure, focus group participants identified the need to establish a strong Board of Directors and structure. A visible and committed Board and staff were seen as one means to establishing credibility.

As an action that would help to build trust in a local ILRC, participants suggested a campaign to address local attitudes towards persons with disabilities. Attitudes were seen as a significant barrier to independent living among persons with disabilities.

In terms of building trust among local service providers, the following question was posed: "How could an ILRC build trust among local service providers, and encourage participation in ILRC activities?"

Similar to approaches to building trust within the disabled community, focus group participants identified the need for a local ILRC to follow-through on actions and show success.

Focus group participants cautioned that local service providers work within a competitive environment, and some may see a local ILRC as a "threat". It would be important that service providers be clear on the roles of an ILRC in the community.

6.3 Volunteer Training

The third issue emerging from an analysis of findings from phases 1 and 2 of this study was related to volunteer training. While local ILRC's rely heavily on volunteer support from the disabled community, many positions would require technical knowledge and skills. Two specific questions were asked in order to better understand the potential for volunteerism in an ILRC, as well as the most appropriate approach to training.

The following statement was read to each focus group, to set the context for this part of the discussion:

> "While most ILRC's have some paid staff, the majority of activities are conducted by volunteer members. Many of these activities however (such as providing peer support and advocacy), involve specific skills, and would require training."

Due to significant overlap in responses to these two questions, both sets of responses were analyzed together. Following are the two questions that were posed during focus group discussions:

> "In your opinion, would members of the disabled community be interested in volunteer positions that require training?"
>
> "How could training be provided, so that volunteers are able to provide support to people with a range of disabilities?"

The general consensus among focus group participants was that persons with disabilities in Hamilton would be interested in a volunteer position that involved training. Participants however, also identified the need to recruit informed and experienced volunteers, with well-defined roles. There was also agreement among participants that workers should be compensated as resources allow.

In terms of training volunteers, the train-the-trainer model was identified by participants. Under this model, key individuals in an organization are trained in a particular skill and, in turn, train other members of the organization. Training in communication and problem-solving were seen as most important for individuals volunteering for an ILRC.

7.0 COMMUNITY FORUM - SMALL GROUP DISCUSSIONS

The final phase of research involved small group discussions held as part of a community forum. The forum was held on Friday, December 5, at the Hamilton Public Library (downtown). The forum was organized with two objectives. First, to share our findings from our research to date. Second, to give participants the opportunity to share their perspectives on some of the key issues. In total, seventeen individuals participated in the open forum, and one of two discussion groups.

The format for small group discussions was based on findings to date, and designed to add depth to those findings not clearly understood. Small group discussions were broken into three sections, to collect information and perspectives on building ILRC membership, providing individual supports in accessing local programs and services, and the potential relationship between a local ILRC and the local service sector.

The following sections in this chapter provide an overview of each of the four areas of investigation.

7.1 Building Membership in a Local ILRC

Findings at this point in the study suggest a strong degree of support for developing an ILRC in Hamilton. In fact, seventy-three percent (73%) of persons with disabilities surveyed through the course of this study identified that they would be interested in joining this type of organization. At the same time, consultations revealed a level of distrust toward new services and programs on the part of persons with disabilities and local service providers.

In order to stimulate discussion around the issue of building membership in a local ILRC, the following statement and question was presented to participants:

> "A local Independent Living Resource Centre becomes more respected and influential as its membership grows. How could we encourage participation in an Independent Living Resource Centre among Hamilton's disabled community?"

Through an analysis of these discussions, a number of key themes emerged with respect to building membership in a local ILRC. The need for broad publicity was key to the discussions, including the need to conduct outreach. From a very

practical perspective, a central and accessible location and incentives such as bus tickets and child-care would also help to boost membership.

Participants suggested that a local ILRC should build on existing networks and groups within the disabled community. Consistent with the priority service needs identified through focus groups, a local ILRC should be marketed as an "umbrella organization" or "information hub", where persons with disabilities can access comprehensive and up-to-date information on local program and service opportunities.

As an additional means to increasing membership, participants emphasized the need to communicate to potential members that as members they have control over the direction and initiatives undertaken by a local ILRC. It is also important that a local ILRC be structured to assure that the needs of a range of stakeholder groups are addressed.

7.2 Individual Support in Accessing Programs and Services

A reoccurring theme in findings through phases 1 to 3 of this study suggested that persons with disabilities need individualized supports to access existing programs and services. In fact, this was identified as a priority during focus group discussions.

To better understand how volunteer members of an ILRC could support other members or clients in accessing local programs and service, the following question was posed:

> "Our research suggests that many individuals with disabilities in Hamilton need support in accessing local programs and services (eg. ODSP, housing services, home-care services). How could volunteer members of an ILRC support other members in accessing local programs and services?"

Again, the idea of a centralized system of maintaining comprehensive and up-to-date information on local program and service opportunities was a central theme. In terms of direct support to ILRC clients, participants suggested that volunteers could teach skills in accessing services, such as what questions to ask.

Another way that volunteer members of an ILRC could directly support clients is through peer support. By connecting volunteers with clients facing similar circumstances, an ILRC could provide opportunities to share experiences, challenges and solutions.

It was suggested by participants that ILRC volunteers could be trained by community professionals, including local service providers. This way, volunteers are passing on accurate information to clients. It was also suggested however, that a local ILRC work toward educating the public and service providers about barriers that their members experience, and work to overcome them in a collaborative way.

7.3 Engaging the Local Service Delivery System

The structure of any organization is crucial to achieving it's vision and goals. As identified in earlier chapters of this report, ILRC's are generally operated by persons with disabilities, and rely heavily on volunteer support. According to CAILC, at least sixty percent of the board of directors must also represent persons with disabilities.

Some decisions about an ILRC's structure however, must be made at the local level. A good example is how closely related a local ILRC should be with the existing service delivery system. To better understand local perspectives on this issue, the following question was posed:

> "What relationship should an ILRC have with the local service system? (Prompts: for example, should local service providers be involved in local ILRC decision-making processes? To what degree?)"

Participants emphasized that a local ILRC must be run by persons with disabilities, and follow an agenda set by the disabled community. Although there was general agreement that a local ILRC should involve local service providers, there were some provisions.

While service providers should be involved in a local ILRC, participants felt that they should not be involved in establishing policy or directives. Participants suggested that local agencies often try to "take control" of new initiatives. It was clear through group discussions that participants did not want a "service provider agenda" to influence the work of a local ILRC.

8.0 DISCUSSION AND RECOMMENDATIONS

As described in the report, an ILRC is a non-profit, community based resource centre, that supports persons with disabilities in achieving their goals of independent living. An ILRC is run by people with disabilities, for persons with disabilities, regardless of disability type.

While all ILRC's are different in that they respond to community needs as identified by their members, there are four core services common to each. These core services include providing information on local programs and services for persons with disabilities, peer support, advocacy, and research and program development.

The purpose of the study was to determine the feasibility of developing an Independent Living Resource Centre (ILRC) in Hamilton. The findings however, support two competing sets of conclusions. The first set of conclusions relate to how a ILRC could effectively organize and support the local disabled community. The second however, relates to a history of conflict and mistrust among local disability services and organizations, and with members of the disabled community.

The following sections explain and provide evidence for these conclusions, based on findings from the study. The report provides a set of recommendations that address some of the potential barriers to developing an ILRC in Hamilton.

8.1 Gaps in Local Service

It is clear from this study that persons with disabilities living in Hamilton face a range of barriers to achieve their goals of independent living. Many of these barriers however, could be addressed by the types of services provided by an ILRC.

A significant gap in local services for persons with disabilities is the lack of access to information on local program and service opportunities. Findings from the survey of key stakeholder groups revealed that seventy-three percent (73%) of respondents felt that information is "not accessible" or only "somewhat accessible". At the same time, ninety-four percent (94%) of respondents felt that access to information is important to achieving ones goals for independent living.

During focus group sessions there was agreement among participants that of the four core ILRC services, centralized access to information on local programs and

services is most needed locally. It is also important that information is relevant to all disability groups. While information services do exist in Hamilton (i.e. Disability Information Services 'HELPLINE' (DISH) and Community Information Services (CIS), these services do not have the capacity to meet the local need.

Although maintaining comprehensive and up-to-date information on local programs and service is an important function and benefit to the disabled community, findings from the study suggest that individuals will require further support in accessing programs and services. Findings from this study suggest that supports would be best provided through a peer support structure.

Peer support may take the form of sharing information, experiences and solutions, support in understanding program requirements and assistance in completing application forms, or teaching individuals skills in self-advocacy.

In terms of community building, findings suggest that Hamilton's disabled community would benefit from a centre or "hub" where various disability groups can come together. Organizing various disability groups would result in a strong voice in the community regarding disability issues. Encouraging was a high level of interest in becoming a member of a local ILRC. Seventy-three percent (73%) of persons with disabilities surveyed expressed interest in membership.

Findings presented in various sections of this report provide valuable insight and considerations related to implementing these support services in Hamilton (based on input from key stakeholder groups). Insights are also provided regarding building community trust, increasing ILRC membership, and training/managing volunteers.

8.2 The Impact of History

The issue of trust emerged repeatedly through the course of the study. During key informant interviews, key stakeholders identified trust as a substantial barrier to organizing within the disabled community. Those interviewed felt that members or potential members of a local ILRC must have clear control over the operation and agenda of the organization.

Focus group findings describe a history of bad experiences and let-downs have created a sense of distrust within Hamilton's disabled community. According to

participants, many of these "let-downs" were related to programs being under-resourced or where program funding is not sustained. In order to build trust within the disabled community, participants felt that a local ILRC would need to demonstrate follow-through on actions and initiatives, and establish credibility through achievement.

Focus group participants also suggested that local service providers work within a competitive environment, and that some may see an ILRC as a "threat". It would be important that service providers receive clear information on the role of an ILRC in the community, and that all issues of potential conflict are dealt with in an open and transparent manner.

During discussions held as part of a public forum, mixed groups of key stakeholders were asked "what relationship should an ILRC have with the local service system". While there was general agreement that service providers should be encouraged to work with a local ILRC, participants emphasized that a local ILRC must be run by persons with disabilities, and follow agenda set by the disabled community.

The existing tensions between key stakeholder groups suggests that developing a ILRC in Hamilton would require extensive community development work, in order to build trust. Effective outreach strategies must be identified and implemented, in order to establish a strong ILRC membership. Ultimately, the membership of an ILRC determines its sustainability.

8.3 Recommendations

Findings from the study clearly show a local need for the types of services an ILRC could provide. The need is also identified, for an organization that acts as a "hub" for local disability groups, where different groups could work together to identify and address unmet needs. In terms of membership in a local ILRC, more than two thirds of persons with disabilities surveyed (73%) expressed an interest.

At the same time, a history of conflict and mistrust exists between and among local disability services and the disabled community itself. While some tension currently exists, and will likely present an obstacle to developing a local ILRC, this history can be overcome. The following recommendations support the development of a local ILRC, and a process that will increase the chances of success.

It is recommended:

1. That a local disability group or organization (not an existing service provider) take the lead role in developing an Independent Living Resource Centre in Hamilton, that upholds the principles developed through the National Association of ILRC's (CAILC).

2. That the development of a local ILRC begins with extensive community outreach and development, to break down barriers, build membership and ensure sustainability.

3. That, in addition to the four core services provided by ILRC's, a local ILRC should support individuals in accessing local programs and services, including teaching skills in self-advocacy.

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APPENDIX A

Survey of Key Stakeholders

Assessing the Feasibility of an Independent Living Resource Centre in Hamilton

Most Independent Living Resource Centres (ILRC's) provide a common set of four program/service types, including information and referral, peer support, advocacy and, research and program development. Each ILRC is different however, in that they respond to local needs and issues as defined by its membership.

The following set of questions relate to the four program/service types:

Information and Referral

On a scale from 1 to 4 (1 being "Not Accessible" and 4 being "Very Accessible") how accessible is information on local programs, services and opportunities for persons with disabilities?

1_____2_____3_____4

Not Accessible Very Accessible

In your experience, what types of information relevant to persons with disabilities are most difficult to access in Hamilton? (Please rank your top 3 choices, e.g. "1" for most difficult, "2" for the second most difficult, etc.)

Information on:

- ❑ Employment Programs
- ❑ Housing programs
- ❑ Health care services
- ❑ Home care services
- ❑ Financial supports (e.g. ODSP, OW, WSIB)
- ❑ Transportation
- ❑ Life-skills training
- ❑ Recreational opportunities
- ❑ Social events
- ❑ Other (please specify)_____
- ❑ Other (please specify)_____

Where do you most often find the information that you need? (Check only one)

- ❑ Local community service agencies
- ❑ Advertisements (i.e. Radio, TV, newspapers, billboards, flyers)
- ❑ Family doctor
- ❑ Social worker
- ❑ Friends and family
- ❑ Other (please specify).

_____

On a scale from 1 to 4 (1 being "Not Important" and 4 being "Very Important") how important is access to information for persons with disabilities, in achieving their goals for independent living?

1_____2_____3_____4

Not Important Very Important

Peer Support

Peer support programs involve persons with disabilities supporting others with disabilities to deal with their issues, either in groups or on an individual basis.

On a scale from 1 to 4 (1 being "Not Important" and 4 being "Very Important") how important is peer support for persons with disabilities in achieving their goals for independent living?

1_____2_____3_____4

Not Important Very Important

What do you see as the most important issues for persons with disabilities that could be supported through a peer support program? (Name your top 3 issues)

1. _____
2. _____
3. _____

With the proper training, would you consider providing peer support to persons with disabilities?

- ❑ Yes
- ❑ No
- ❑ n/a

Advocacy

Advocacy may involve organizing around a specific issue facing persons with disabilities, and lobbying local, provincial or federal governments for change. An ILRC could provide support for this type of organizing and lobbying:

On a scale from 1 to 4 (1 being "Not Effective" and 4 being "Very Effective"), how effective do you feel the disabled community in Hamilton has been in organizing and lobbying for change?

1_____2_____3_____4

Not Effective Very Effective

What do you see as the most important issues facing persons with disabilities, that requires changes to government policies? (Name your top 3 issues):

1. _____
2. _____
3. _____

Do you believe that organizing and lobbying can achieve change in policies that effect persons with disabilities?

❑ Yes

❑ No

Research and Program Development

Part of the role of an ILRC is to identify needs of persons with disabilities in the community, and work with local service providers to develop services/programs to meet those needs:

In your opinion, what types of programs and services for persons with disabilities are we most lacking in Hamilton? (Please rank the top 3. i.e. "1" for the most lacking service type, "2" for the second most lacking, etc.)

- ❑ Employment services
- ❑ Life-skills programs
- ❑ Housing services
- ❑ Health-care services
- ❑ Home care services
- ❑ Recreational programs
- ❑ Social programs
- ❑ Transportation services
- ❑ Financial supports
- ❑ Other (please specify):

  _____

- ❑ Other (please specify):

  _____

Would you be willing to work with others on the planning and development of programs to meet these needs?

- ❑ Yes
- ❑ No

Membership

An ILRC provides opportunities for individuals with disabilities to find support and to support others in achieving their goals of independent living. Membership in an ILRC is as much about active participation as it is about receiving supports, and membership is open to all individuals who wish to support the disabled community in Hamilton.

From what you have learned about an ILRC, would you be interested in becoming a member of this type of organization?

- ❑ Yes
- ❑ No

Would you be willing to work within cross-disability groups?

- ❑ Yes
- ❑ No

Approximately how may hours per month would you be willing to contribute to the operation of an ILRC in Hamilton?

- ❑ 1 to 5 hours/month
- ❑ 6 to 10 hours/month
- ❑ 11 to 20 hours/month
- ❑ More than 20 hours/month

Would you be willing to pay an annual membership fee to support the operation of an ILRC in Hamilton?

- ❑ Yes
- ❑ No

If "Yes", what would be a reasonable annual membership fee?

- ❑ Less than $25
- ❑ $25
- ❑ $50
- ❑ $75
- ❑ $100
- ❑ $100+

About You

Which of the following statements describes you? (Please check all that apply)

- ❑ A person with a disability
- ❑ A parent of a person with a disability
- ❑ A program or service provider for persons with disabilities
- ❑ Other (please specify):_____

Age range:

- ❑ 0 to 15 years
- ❑ 16 to 24 years
- ❑ 25 to 34 years
- ❑ 35 to 44 years
- ❑ 45 to 54 years
- ❑ 55 to 64 years
- ❑ 65 + years

Gender:

- ❑ Male
- ❑ Female

If you are interested in further information on the findings from our survey, or would like to support the development and operation of an ILRC in Hamilton, please provide the following contact information:

Name: _____

Address: _____

Postal Code: _____

Telephone: _____

Email: _____

Thank you for completing our survey,
your opinions and ideas are important to us.

APPENDIX B

Key Interview Format

Assessing the Feasibility of an Independent Living Resource Centre in Hamilton

KEY INFORMANT INTERVIEW FORMAT

Thank you for agreeing to participate in an interview to support our research. The purpose of this study is to determine the need for an Independent Living Resource Centre (ILRC) in Hamilton, and different ways that a Centre could provide supports to persons with disabilities.

The first phase of our research was a survey of persons with disabilities, family and caregivers, and local service providers. The questions I would like to ask you today will help us to better understand some of the survey findings.

Your confidentiality will be respected. All responses will be reported in general terms, and your name will not be directly connected to a particular response. The interview should take about 20 minutes to ½ hour.

Access to Information

While the majority of those surveyed felt that access to information on local programs, services and opportunities for persons with disabilities is important to achieving their goals of independent living, it was indicated that such information is currently not very accessible. In fact, more than half of those surveyed identified informal sources such as friends and family, family doctor and social workers as their primary sources of information.

- In your opinion, if comprehensive and up-to-date information on local programs, service and opportunities for persons with disabilities was maintained through an ILRC, would members/clients require support in identifying the most appropriate programs and services for them?

- What types of supports do you feel might be needed?

Peer Support

Peer support programs involve persons with disabilities supporting others with disabilities to deal with their issues, either in groups or on an individual basis. The majority of those surveyed felt that peer support is very important for persons with disabilities in achieving their goals for independent living.

- From your perspective, how could an ILRC coordinate or offer peer support to its members?

- In your experience, are there other peer support networks or services currently operating in Hamilton? If "Yes", are there any gaps or areas where peer support is not available?

Advocacy

Advocacy is defined as "organizing around a specific issue facing persons with disabilities, and lobbying local, provincial or federal governments for change". While more than 95% of those surveyed felt that lobbying can achieve change, the majority felt that the disabled community in Hamilton has not been particularly effective in this role.

- From your perspective, how could an ILRC help the disabled community to identify and prioritize issues to address?

- How could an ILRC help to effectively organize the disabled community in lobbying efforts?

Research and Program Development

Part of the role of an ILRC is to identify local needs and work with local service providers to develop programs and services to address these needs. Specifically, those surveyed identified housing, home-care, financial supports, and transportation as program types most lacking in Hamilton.

- In your opinion, would local service providers view an ILRC as being a local authority in terms of identifying issues and recommending strategies for change?
- How could an ILRC help to facilitate or coordinate local program development?

APPENDIX C

Focus Group Format

Assessing the Feasibility of an Independent Living Resource Centre in Hamilton

Focus Group Format

Thank you for agreeing to participate in today's focus group. This is the third phase of our research, considering the need for an Independent Living Resource Centre (ILRC) in Hamilton, and how an ILRC might operate locally.

(Ask the group if they are familiar with the ILRC concept...if not, explain)

So far in our research, we have conducted a detailed survey of local service providers, caregivers and persons with disabilities. We have also conducted in-depth interviews with a number of individuals representing these three groups.

The issues we would like to discuss today will build on some of the findings from the survey and interviews. To ensure confidentiality, your name will not appear in the final report. So please speak freely, as your ideas and opinions are important to us.

(Review "rules" for group discussion...)

We have developed 3 questions for discussion. The entire meeting will take about forty-five minutes. Let's get started...

1. Currently there are 24 Independent Living Resource Centres in Canada. Most ILRC's provide a common set of four program or service types, including information and referral, peer support, advocacy and, research and program development.

   Based on your knowledge of what services and supports currently exist in Hamilton, which of these four program/service types would you consider most needed locally?

   What other activities or roles could a local ILRC become involved in, that would support persons with disabilities in Hamilton? (Prompts if needed: such as social or recreational supports)

2. Findings from our survey and interviews suggest that an ILRC should be a central hub, where local disability groups, service providers and persons with disabilities can share ideas and information, and coordinate efforts that promote independent living. At the same time, the issue of "trust" was raised as a factor that might affect participation.

   In your opinion, how could an ILRC build trust among persons with disabilities in Hamilton, and encourage participation in ILRC activities?

   How could an ILRC build trust among local service providers, and encourage participation in ILRC activities?

3. While most ILRC's have some paid staff, the majority of activities are conducted by volunteer members. Many of these activities however (such as providing peer support and advocacy), involve specific skills, and would require training.

   In your opinion, would members of the disabled community be interested in volunteer positions that require training?

   How could training be provided, so that volunteers are able to provide support to people with a range of disabilities? (Prompt: what topics?)

APPENDIX D

Community Forum - Small Group Discussion Format

Assessing the Feasibility of Developing an Independent Living Resource Centre in Hamilton

Open Forum

Small Group Discussion Questions:

1. A local Independent Living Resource Centre becomes more respected and influential as its membership grows. How could we encourage participation in an Independent Living Resource Centre among Hamilton's disabled community?

2. . Our research suggests that many individuals with disabilities in Hamilton need support in accessing local programs and services (eg. ODSP, housing services, home-care services). How could volunteer members of an ILRC support other members in accessing local programs and services?

3. What relationship should an ILRC have with the local service system? Prompts: for example, should local service providers be involved in local ILRC decision-making processes? To what degree?